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Bib Data Sheet

CONFIRMATION NO. 4553

<b>SERIAL NUMBER</b> 10/573,330	<b>FILING OR 371(c) DATE</b> 03/24/2006 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> 21500P
<b>APPLICANTS</b> Janine T. Bryan, Furlong, PA; Michelle K. Brownlow, Jamison, PA; Loren D. Schultz, Harleysville, PA; Kathrin U. Jansen, Doylestown, PA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/31326 09/24/2004 which claims benefit of 60/506,812 09/29/2003 * (*)Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b> AD				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 07/15/2006				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance AD Verified and Acknowledged <u>                    </u> Examiner's Signature <u>AD</u> Initials		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 23
				<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 210				
<b>TITLE</b> Optimized expression of hpv 45 I1 in yeast				
<b>FILING FEE RECEIVED</b> 1180	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	